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CONFIRMATION NO. 1102

<b>SERIAL NUMBER</b> 10/620,427	<b>FILING OR 371(c) DATE</b> 07/17/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1617	<b>ATTORNEY DOCKET NO.</b> 025562.0009-US01
<b>APPLICANTS</b> Dileep Bhagwat, Bronxville, NY; Bradley P. Glassman, Fairfield, NJ; Daniel Glassman, Fairfield, NJ;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/998,537 11/28/2001 ABN <i>54</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> <b>** SMALL ENTITY **</b> 10/17/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 26853				
<b>TITLE</b> Antioxidant dermatological composition				
<b>FILING FEE RECEIVED</b> 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	